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ABSTRACT

Reviewed are studies of attachment, separation anxiety, and caregiver intervention techniques and strategies. Discussion of attachment centers on patterns of attachment and children's behavior in the "strange situation." Discussion of separation anxiety indicates that the phenomenon occurs in many different cultures. Topics covered include: (1) initiation and termination of the fear; (2) individual differences; (3) predisposing factors; (4) associated debilitating effects of separation anxiety; (5) normal separation anxiety at entrance to nursery school; and (6) criteria for diagnosis of clinical separation anxiety disorder. Discussion of intervention techniques deals with methods for preparing children for separation experiences, familiarization visits to centers, gradual adjustment to the center, home visits by and conferences with caregivers, security through transitional objects, effects of displaying photographs of the child and family in the day care environment, benefits of symbolic and dramatic play, use of literature and storytelling to comfort distresed children, and parent responsibility in leave-taking. Initial distance of caregiver from child, use of indirect contact by caregiver, and resemblance of caregiver to child's mother are considered in regard to their influence on the child's reaction to separation. (RH)

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A REVIEW OF THE LITERATURE OF RESEARCH INTO SEPARATION ANXIETY: ITS CAUSES AND ITS MEANING TO THE CAREGIVER IN THE CHILDCARE CENTER

by
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INTRODUCTION

When a child is separated from their parent or primary caregiver, this separation can result in anxiety and stress for the young child and parent (during this paper, we will select the terms "primary caregiver", "parent" or "mother".depending on the use of the term in the literature by the authors. When not specified, the term "primary caregiver" will be used). The parent is included in the opening sentence because the child is impacted not only by their own issues but are also reflecting and/or mirroring the anxiety and stress of the parent. Certain children will exhibit this anxiety and stress to a higher degree than others, yet it is experienced by all children. This anxiety at separation also presents a significant problem to the secondary caregiver working in a child care center (Osborne, 1986). To understand the dynamics of separation anxiety, you must examine the relationship of psychological patterns to separation anxiety.

Segal and Yahraes (1979) view the development of psychological patterns, such as the development of attachment, as a "constantly evolving and changing process of the child relating to it's environment."

We will look at this pattern of growth and change as to what is said about it in the literature. We will see how different theorists view the developmental pattern of the child and try to understand attachment and the ways that caregivers can help children deal more effectively with separation anxiety. The data that is explored will lead us to some possible interventive techniques and strategies that will enable the secondary caregiver to help children successfully separate from their primary caregiver.

ATTACHMENT

"Attachment is the affectional tie of one person to another and refers to the special closeness that develops between the infant and his or her primary caregiver. Ainsworth & Bell, 1970)

It is believed that a child's attachment is one factor which may influence separation anxiety. The research of John Bowlby showed us that is is essential for infants to have a close bond with their mother or primary caregiver. He believed infants, between six and twelve months of age, develop an attachment to a specific caregiver. He felt that this attachment to the one primary caregiver is necessary for healthy development. Although he also felt that, at the same time, it is important to familiarize infants and toddlers with other caregivers. If alternate care for the child is needed for the working mother, the secondary caregiver should be consistent. Bowlby believed that the mother-infant bonding was a necessary precursor to secure other social relationships (Bowlby, 1969, 1963).

Bloom-Feshback (1980) feel that Bowlby undervalued the role of the father in attachment. They differentiate between the features of the attachment to the mother and the father, but state that "the evidence is contradictory as to whether the infant between seven months and two years of age shows the traditional preference for one parent over the other. (p.507)" They state that fathers are more physically active with their infant and toddlers and that interaction with their children are more

centered around play contexts. Mothers tend to interact more around caregiving activities. Feshbach suggests that the father-child relationship has a great bearing on the adaptability of the child to the separation presented by the nursery school experience. Feshback's study shows that we may be undervaluing the role of the father.

Ainsworth and Bell's (1974) study illustrates, for the reader, that children have different patterns of attachment. They identified three patterns of attachment which they used to interpret the quality of the relationship; they include:

1.) securely attached,

2.) anxiously attached, ambivalent, and

3.) anxiously attached - avoidant.

Ainsworth and her colleagues believed that a secure bond was most likely to develop between the primary caregiver and the infant when the primary caregiver was responsive to the infant's needs and had positive interaction with the child. It was found that children who had experienced a secure bond with a responsive primary caregiver felt more secure in relationships and in new environments. These children also appeared to cry less at separation. Where the primary caregiver was not responsive to the infant's needs and did not have positive interaction with the child, the child was likely to be anxiously attached, ambivalent or anxiously attached, avoidant. The children who displayed insecure attachment and appeared closely bound to their primary caregiver usually are ambivalent and have difficulty separating from their primary caregiver. These children often make excessive demands for attention and cling. There are also other insecure, anxiously attached children that Ainsworth classified differently from the ambivalent, anxiously attached child, these children

exhibit avoidance behavior. These children separate easily from their primary caregiver and appear to be undisturbed by their absence. When the primary caregiver returns, this child usually ignores or avoids them (Ainsworth, 1978). The reader must remember that some children in child care may look avoidant in the "Strange Situation, not because they are not attached to their mothers, but rather because they are not stressed by the separation" (McCartney and Galanopoulos, p.18). These children, being securely attached, are able to readily separate and explore without stress. Therefore it is important for the caregiver to look beyond the immediate situation of separation to see how the child responds to the return of the mother. The quality of response will help the secondary caregiver to determine the type of attachment and separation being presented.

Maccoby (1980) felt that children who exhibited secure attachments by their second year were more prepared to handle the challenges that they would experience during their preschool years.*

* Before we leave this topic of attachment and child rearing, we would like to have the reader look at the present mother-child rearing of our industrialized society and realize that there is nothing new about subsititue child care. In nonindustrial societies exclusive child rearing by the mother is rare (Weisner and Gallimore, 1977).

SEPARATION ANXIETY

Separation anxiety is not a phenomenon particular to the United States it is found to occur in many different cultures. Separation anxiety has been found in many diverse countries such as the United States, Uganda (Ainsworth, 1967), Israel (Bettelheim, 1969), and Guatemala (Lester, Kotelchuck, Spelke, Sellers, and Klein, 1974).

Rutter reported that several studies that have been done on day care show that the effects of separation anxiety are more obvious in boys compared to girls (Rutter, 1981). Conversely, Jorde's study found that there were no significant differences exhibited between males or females in how they adjusted to school (Jorde, 1984).

Separation anxiety, in early childhood, is the stress, tension, or anxiety that a child experiences during the absence of their primary caregiver; this behavior usually emerges between the age of eight and twelve months (Flake-Hobson, Robinson, and Skeen, 1983). It is believed that separation anxiety reaches its peak at beginning at eighteen months of age and its affect begins to decrease by age three (Weinraub and Lewis, 1977). When the infant enters the stage of crawling, they begin to work out the difference between their need for dependence and their urge to become independent. It's important for parents to meet their child's dependency needs, yet encourage the child's struggle for independence. This relates back to patterns of parenting mentioned by Ainsworth and the need to be responsive to the child's needs and to be positive in their response to the child's exploration with independence.

Many times, children who exhibit excessive separation anxiety, who are seen as unusually intrusive and in need of constant attention, or

inversely, are unusually conscientious and eager to please are behaving so because they also have other associated fears such as fear of the dark that are further hampering the child's adaption to the new situation (American Psychiatric Association, 1987).

Naturally we must realize that some children experience separation anxiety more intensely than others. There are many variations of background that will effect how a child will react. Balaban explains that a child may have recently experienced family disruption caused by separation, divorce, loss or death of a loved one. The child might have physical or psychological disabilities that can influence how they handle the parent/child separation. Recent incidents of separation can color how the child will react to the occurring situation. If the child has been able to handle these situations with positive consequences, then the child is more likely to be ready for the next stressful situation. But if the prior stressful situation had negative consequences and the child has not been able to successfully integrate the episode, the child will most likely have difficulty handling the new stressor. All these different situations will influence the child's coping abilities (Balaban, 1987).

Not only can prior experiences influence the intensity of a child's separation anxiety but these life events can be predisposing factors for causing separation anxiety. "In most cases the "reaction" develops after some life stress: typically a loss, the death of a relative or pet, an illness of the child or a relative, or a change in the child's environment, such as" a move to a new neighborhood or entrance into preschool (American Psychiatric Association, 1987).

Another predisposing factor can be poor attachment. One of the causes for such poor attachment could be the mother having a anxiety disorder of

her own (American Psychiatric Association, 1987). Alice Miller states a case for exploring the role of narcissism in the relationship between parent and child. She believes that the parent's need to be the center of the child's life and the parent's need to find love, to fill the vacuum caused by a lack of self-love, shapes the child to react with the response of separation anxiety. The parent's need to be the center of the child's life will send messages to the child that the separation is not ok even though the parent is stating that it is. These confusing messages will cause conflict and anxiety in the child (Miller, 1981).

There are some (Bloom-Feshbach and Blatt, 1979) who believe that the child-rearing patterns reported by Baumrind (1967) to have a direct and expectable influence on a child's ability to develop attachment and to experience successful separation responses. Baumrind identified three types of parenting patterns. Type 1 is high nurturance, moderate control. Type 2 is low nurturance, high control. Type 3 is moderate nurturance, low control. The blending of mother and father using similar or different patterns would lead to different expectations of separation response. Erickson believed that if children have "basic trust" in their primary caregiver they will be more accepting of their new environment and secondary caregivers. The "goodness" that is experienced in the inner world of mother/child is transferred to the outer world (Erickson, 1963).

Issues of separation anxiety can affect the child beyond the aspect of the stress of separating. The failure to be able to securely explore their surroundings have secondary negative impact. There are children who appear unable to handle group situations, unable to enter into activities, unable to respond to secondary caregivers, and lacking in the prosocial development needed to respond to other children. These children present a

special problem for the secondary caregiver in identifying that separation anxiety is the cause and in meeting the individual needs to the child while still weighing the needs of the entire group (Balaban, 1987). Extreme cases may require the aid of profession counseling of parent and child. It is difficult to differentiate between the underlying cause of separation anxiety and the resultant lack of skills that this may cause.

For many children, nursery school is the first experience that the child has with sustained separation from the primary care-giver. Separation from the parent and the adaptation to nursery school is a normal and important step in the child's journey to psychological development. Children will normally respond to the initial entry to nursery school with expressions of distress. Crying, direct verbal protest, clinging to the parent, and other forms of acting out behavior will be used to express the feeling of loss and separation. This normal protest directly linked to the separation may last up to four weeks and still be considered normal adaptation (Bloom-Feshbach, 1980). However, it is important for the reader to understand the full range of this syndrome to be able to differentiate just what is "normal" and what is considered "clinical separation anxiety disorder." Many times the intensity of the separation protest may cause concern as to whether or not the child needs professional help. The Diagnostic and Statistical Manual of Mental Disorders (Third Edition - Revised) list the criteria for diagnosis of "clinical separation anxiety disorder." This information follows:

DIAGNOSTIC CRITERIA FOR SEPARATION ANXIETY DISORDER;

A. Excessive anxiety concerning separation from those to whom the child is attached, as evidenced by at least three of the following;

(1) unrealistic and persistent worry about possible harm befalling

major attachment figures or fear that they will leave and not return.

(2) unrealistic and persistent worry that an untoward calamitous event will separate the child from a major attachment figure, e.g., the child will be lost, kidnaped, killed, or be the victim of an accident

(3) persistent reluctance or refusal to go to school in order to stay with major attachment figures or at home

(4) persistent reluctance or refusal to go to sleep without being near a major attachment figure or to go to sleep away from home

(5) persistent avoidance of being alone, including "clinging" to and "shadowing" major attachment figures

(6) repeated nightmares involving the theme of separation

(7) complaints of physical symptoms, e.g., headaches, stomach aches, nausea, or vomiting, on many school days or on other occasions when anticipating separation from major attachment figures

(8)..recurrent signs or complaints of excessive distress in anticipation of separation from home or major attachment figures, e.g., temper tantrums or crying, pleading with parents not to leave

(9)..recurrent signs of complaints of excessive distress when separated from home or major attachment figures, e.g., wants to return home, needs to call parents when they are absent or when child is away from home

B. Duration of disturbance of at least two weeks.

C. Onset before the age of 18

D. Occurrence not exclusively during the course of a Pervasive Developmental Disorder, Schizophrenia, or any other psychotic disorder.(American Psychiatric Association, 1987, p.61)

Most often the separation anxiety that the secondary caregiver will see is that of normal expectations. Knowing this can help the caregiver in response to the situation and in helping the parents to understand the normalcy of the response.

* The encounter with separation anxiety appears to manifest itself at different phases of the human life experience. Various events that occur in a person's life, such as when leaving a well-known situation for the unknown, can rejuvenate the feeling of separation anxiety (Olshaker, 1971).

INTERVENTIVE TECHNIQUES & STRATEGIES

Separation anxiety is an emotion which is equally shared by both primary caregiver and child. When we discuss separation anxiety in relation to children starting at a childcare center, the teacher, as a participant in the separation process, must remember to keep in mind this dynamic relationship between primary caregiver and child (Jorde,1984; Balaban,1987). Children need time and lots of reassurance during this transitional time (Miller & Weissman, 1986) and so will the primary caregiver.

Parents or primary caregivers often convey mixed messages to their children. The parent serves as a role model for their children, if the parent feels uncomfortable with their decision on choosing a center, then the child most likely will have more difficulty in their adjustment (Lally,1985; Balaban, 1987). When children face these separation emotions, they look to an adult for guidance. The adult can guide them by expressing positive emotions of their own, and by demonstrating appropriate ways to react to these emotions. Maccoby (as cited in Ziegler, 1985, p.32) feels that "children will thus expand their pool of possible acceptable responses in similar circumstances."

Research has shown that we can prepare children for separation by providing them with information prior to leaving them (Weinraub & Lewis, 1977; Miller & Weissman, 1986). Similar results were found in a study by Adam & Passman (1981) which showed that two-year olds who were briefly prepared by their mothers for separation adjusted better and played with more toys. These results also showed that brief preparations

helped the children understand the departure, but that extensive, lengthy preparations could actually cause more distress. An explanation for this outcome is that children may realize that lengthy preparations are usually for a more serious or long-term event. This need to not over prepare the child should be kept in mind by the reader as a guide while reviewing the following preparation strategies.

Prior to enrolling children in a child care center, it is often advised to visit the center to familiarize both the primary caregiver and child with the setting (Clark-Stewart, 1982; Miller & Weissman, 1986; Balaban, 1987). It is also believed by some that the presence of the parent or primary caregiver in the introduction of the new setting can reduce the stress related to separation anxiety, this helps the child and parent adjust to the situation together (Cox & Campbell, 1968; Whiren, 1982; Miller & Weissman, 1986; Balaban, 1987).

Conversely, Schwarz & Wynn's study (1971) suggested that most children will adjust to a child care situation without special preparation. They found that the presence of a primary caregiver and previsits to a child care center were not significant in reducing anxiety. This study did find that children who had previous group experience and separations away from home were more accepting of the primary caregiver's departure. Similar results to Schwartz and Wynn were reported by Rutter who felt that children who had prior separation experience would benefit from the exposure to separation, since "children used to brief separations of a happy kind are less distressed by unhappy separations such as hospital admissions" (Rutter, 1971, p. 237).

It is believed that the anxiety caused by separation can be reduced by gradually adjusting into a child care center. This is done by starting out

the child for just a few hours the first couple of days and then gradually extending into a full day. This can help the child, as well as the parent or primary caregiver, to adjust to the new situation. One problem is that often the primary caregiver is in the work force and is unable to work out this schedule of gradual enrollment (Whiren, 1982; Miller & Weissman, 1986; Balaban, 1987).

Home visits and/or conferences are yet another way to ease the separation process. Home visits are often valuable in making the child feel more comfortable with their new caregiver relationship (Whiren, 1982; Jorde,1984; Balaban, 1987). In Jorde's study, the mothers felt that home visits made prior to the start of school were helpful in reducing their child's stress. Photographs were taken of the children and the teacher used these for name tags on the first day of school. The teacher also brought each child playdough as a gift and it appeared that the children appreciated this gesture (Jorde, 1984). Parent meetings may also be valuable for the parent or primary caregiver, these meetings can be informative as well as helping parents get to know the teachers and parents of the other children in the center. These meetings can result in increasing the parents awareness of the problem of separation anxiety and help them to understand some ways to ease the problem of separation anxiety. It is also beneficial for parents to realize that other parents are experiencing the same problem (Whiren, 1982; Osborne, 1986; Balaban, 1987).

Transitional objects such as a stuffed toy or blanket appear to make the transition from home to child care center easier for the child entering this new environment. These objects appear to provide the child with a sense of security (Clark-Stewart, 1982; Miller and Weissman, 1986;

Osborne, 1986; Balaban, 1987). Psychiatrist, D.W. Winnicott (as cited in Balaban, 1987) describes these "transitional objects" by saying "it is not the object itself that is transitional; it represents the infant's transition from a state of being merged with the mother to a state of being in relation to the mother as something outside and separate" (Winnicott, 1957, p. 183).

Photographs of the child and family placed in an accessible and easily viewed place may provide the the child with a sense of security. It serves as a reminder and reinforces the concept that their families do exist and will return (Osborne, 1986 and Balaban, 1987). A study done on the effects of "Mother Photographs on Separation Distress" completed by Passman and Longeway (1981) found that providing a child with a photograph helped the child during separation adjustments. A photograph of the child's mother was found to effect two-year old's behavior upon separation. They found that the children looked at and held the photographs and were thus able to play in and explore their environment for a longer period of time than the children in a control group who were given photographs of an unrecognizable person.

There are various aspects of play that come into action and assist the child coping with separation. Play allows the child to symbolically express feelings and concerns that they might not be able to directly express (Symbolism is a defense mechanism that can allow an individual to express fears and concerns that might be otherwise be too threatening to face openly (H.H. Goldman, 1984)). Playful acting out of stressful, difficult, or unpleasant situations can assist the child in mastering the emotions experienced (Damon, 1983; Berger, 1971). "Because puppets belong in the realm of fantasy, they encourage children to think both

imaginatively and creatively, and can foster children's abilities to solve their problems" (Smith, 1979, p. 4). This form of play can foster the child's ability to identify and resolve their problems in human relations. Puppetry and dramatic play can assist the child in developing the ability to generate different strategies to reacting to the separation (Smith). Dramatic play and puppet play allows the child to express their feelings openly; this openness will help the caregiver to identify the fact that a child is experiencing a difficulty with separation and possibly lead the caregiver to being able to begin to identify the source of and the extent of the problem. Art is another tool for allowing the child to symbolically express themselves and show their feelings about separation (Balaban, 1987). Milos conducted a study in a childcare center setting that explored the components of using dramatic role play with a doll house and dolls in ameliorating the adverse affects of separation anxiety. As a result of her findings, she suggested that each room in a childcare center incorporate a school dollhouse and role playing time into their methodology for identifying and treating the child with separation anxiety. Having this tool would be especially helpful during the first few weeks of a child's attendance at the childcare center and especially for the child exhibiting separation anxiety. Milos stated that the children should be encouraged to play, particularly during the first few weeks of the child's attendance in the childcare center, with the dolls, to express their own feelings through role playing, and to have the dolls react to those feelings; thus the childcaregiver might also identify a child, who is dealing with these feelings of separation and anxiety and does not exhibit the overt signs of anxiety. Milos found, as did Balaban, that this play could help to ease a child's anxiety over separation and could aid parents and teachers in

understanding the child's inner feelings (Milos, 1980).

Another way of approaching this problem of separation anxiety, the feelings involved, and the concerns of the child is through the use of literature and story telling. Books can be used to reassure children and to help them overcome separation fears. It is important to carefully choose books and to select stories that portray school and teachers in a positive manner. Children can find comfort from these books which involve separation situations and that show how the children in the story situation cope with and react to the separation (Land and Norton, 1985; Balaban, 1987). Overstad (as cited in Jalongo, 1983) stated that using literature for the purpose of mental health is called "bibliotherapy." These types of books are becoming increasingly prevalent as they talk about real-life situations, handle the topics sincerely and sensitively, and take into consideration the child's developmental level (Jalongo, 1983). The use of flannel boards, fingerpuppets, and the like in storytelling can substitute for published books in presenting and reacting to situations (Fisher, 1987).

When presenting a child with separation situations, it is important that the parent inform the child of the pending separation and that the child is made aware of the event of separation when it occurs, i.e.: "Johnny, I am leaving now." Parents are strongly discouraged from "sneaking" away. It was found that children whose mothers left without saying good-bye and explaining when they would return showed the most anxiety (Weinraub and Lewis, 1977). Miller and Weissman (1986) brought forth the opinion that parents believe that "slipping away" is the answer because they, the parent, will not have to face their distressed child. However, slipping away causes the child to feel abandoned and betrayed

and the child may lose trust in the parent (Miller and Weissman, 1986; Balaban, 1987). It is suggested that the parent always announce their departure by saying good-bye. It is also important for the parent to leave without looking back to see how the child is reacting to this departure; this is especially important if the child is crying. If the parent has any concern as to whether the child is able to and has been able to cope with the separation, the parent should call the childcaregiver to determine the child's progress in handling the separation. Often the separation anxiety is a mirror of the parent's concern and not of the child's (Miller, 1981). Generally, by the time the parent is able to call to obtain a report on the child's progress, the child will be actively involved in play and over the stress of the separation. (Whiren, 1982; Miller and Weissman, 1986).

In his study on separation, Dr. J.R. Lally (1985), found three significant influences on children's reactions to separation:

(1) Distance: children need time and space when arriving in a new situation. The child will adjust better if the new caregiver waits at a distance and allows child to stay by their primary caregiver. The child prefers to stay by their primary caregiver for a few moments before entering into the new situation.

(2) Contact: children are more comfortable when the new caregiver avoids direct contact. Lally suggests that the new caregiver use a toy or game to make indirect contact with the child first. He warns that making eye contact or touching a child too soon will only upset the situation.

(3) Appearance: children appeared to adjust faster to new caregivers who resembled their own mothers. Lally found that children would of course eventually adjust to a new caregiver who was different in looks and mothering style, it merely requires more time.

Awareness of the effect of Father/mother child-rearing patterns on a child's mode of separation response provides limited intervention value to the classroom teacher but may aid the teacher in understanding the response of the child. Teachers/secondary caregivers have limited ability or power to change child-rearing patters but the understanding of these patterns and their effects on the child may aid the teacher in their response to the child.

SUMMARY

In early childhood, some degree of separation anxiety is a normal occurrence. We have seen how the different theorists view child development. Knowledge of attachment and the variables that influence a child's ability to appropriately adapt to separation from the primary caregiver can suggest techniques that will assist the secondary caregiver in selecting the interventive methods that will result in positive outcomes. The goal should be for the child to master the emotions caused by their fear of separation and both the primary and secondary caregivers must be able to work together to enable the child to achieve this outcome.

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